| FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAG | FORM DR-2 | DISCLOSURE | | |
|--|---|---------------------|--|---------------------|
| COMMITTEE NAME (Must be same as on Statement of Orga | nizetion) IA ETHICS AN |) n n n | (Rev. 05/2002) For Office Use O | |
| IMPORTANT: Indicate type of committee you are reporting for: | 2009 JAN 21 PM 12 | | Comm. # | 9455 |
| (1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4) (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Cen (8)Support State of Candidates | County/Local Candidate | | Audited | |
| CANDIDATE COMMITTEES ONLY: | | ľ | | |
| Candidate Name | Political Party | | | |
| Office Sought | District (if Senate or House |) | | |
| (Rens of | 641-858-5 | 490 | | 7/09 |
| SIGNATURE OF TREASURER (or person filing this report) | TELEPHONE | | D'ATE S | SIGNED |
| Routine Penalties Due For Late SEE INSTRUCTIONS ON BACK AND COMPLETE THE I AM FILING A 1/19/09 | FOLLOWING SENTENC REPORT FOR AN/A (1) ELE | <u>E:</u> :CTIOI | N /(2)NON-ELEC | TION YEAR. |
| (report date) | | | one 🔼 | |
| ☐CHECK IF AMENDMENT TO REPORT DATED | | Local C | ommittees, enter Da | ate of Election |
| Check if this is final (termination) report and attach Notice of (You must continue to file reports until a Notice of Diss | Dissolution Louis Divio. | County which E | & Local Committees Election is held | s, enter County in |
| | | | | |
| STATEMENT | OF CASH ON HAND | | | |
| This | is the total of all monies he | d i | s <u>233</u> | 2.45 |
| CASH ON HAND at the beginning of the reporting period. (This by the committee. This amount MUST be the same as of the last reporting period, or must be zero if this is fin ADD TOTAL MONEY TAKEN IN THIS PERIOD | is the total of all monles he the cash on hand at the end at report filed.) | | つご | 2.45 |
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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

| MONETARY |
|--------------|
| EXPENDITURES |
| |

CHECK THIS BOX IF AMENDING FORM

| 1 | LTA | PAC | | |
|--------------------------------|--|---|---|--------------------|
| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3) | AMOUNT EXPENDED |
| 12/19/0 | ID# 1344 CK# 1059 | Courtney for State Senate Committee | ()) | \$ 25000 |
| 14400 | ID# | Committee | (, , | *25000 |
| | CK# | | () | |
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| <u></u> | | | SUB-TOTAL | \$ |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Campaign funds may be used only for:

- (1) campaign purposes,
- (2) constituency expenses, and
- (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

| Page | of _ | | |
|------|--------------|---------|----|
| | Ifor Sch | edule l | B) |

TOTAL (if last page of this schedule)